NEW MEXICO HOUSE OF REPRESENTATIVES **APPLICATION FOR EMPLOYMENT (ATTACH CURRENT RÉSUMÉ)**

Position(s) Applied i	for in order of	preference				
Name					, AN G. H	
(Last)	(First)	(Initial)	(Home Phone)	Co	ntact Phone/Cell	
Physical Address				E-Mail Addre	SS	
Mailing Address		City		_ County	Zip	
Resident of New MexicoYesNo Number of			er of Years	Date of Bir		
Legislative District	Nan	ne of Representative_			(Optional)	
Prior Legislative Expe	rience (Date(s)/	Position(s) held)				
EDUCATION	H.S. Diplor	na/GEDCollege Attend	Post Secondary/Voced_	cation Training S Degree	SchoolMajor	
JOB SKILLS/ EXPE	ERIENCE:					
					Mail MergeExcel	
(Most recent employer)				(Employer)		
(Address/City and State/Telephone)			(Add	(Address/City and State/Telephone)		
Position held	D	uration	Position held		Duration	
(Reason for Leaving)				(Reason for Leaving)		
PERA retiree?	YesNo	Date of retiremen	t			
Ido do not cons employment informati		se of Representatives	s to contact employers	listed and autho	orize their release of my	
	lidays, late hour	s and weekends. I a	lso understand as a se	asonal employee	lative session and it may e, I will be compensated	
APPLICANT SIGNA	ΓURE			Date		
					(Rev. 12/10)	